

FORM LM-30
LABOR ORGANIZATION OFFICER AND
EMPLOYEE REPORT

Form approved
Office of Management
and Budget
No. 1215-0188
Expires 11-30-2008

This report is mandatory under P.L. 86-257, as amended. Failure to comply may result in criminal prosecution, fines, or civil penalties as provided by 29 U.S.C. 439 or 440.



READ THE INSTRUCTIONS CAREFULLY BEFORE PREPARING THIS REPORT.



1. File Number U- <u>5950</u>	2. Fiscal Year Covered From: <u>1 / 1 / 04</u> Through: <u>12 / 31 / 04</u>
3. Name and address of person filing. Name <u>Stephen M. Sweeney</u> P.O. Box, Bldg., Room No., if any _____ Street <u>360 Nottingham Road</u> City <u>Woodbury</u> State <u>New Jersey</u> ZIP Code + 4 <u>08096</u>	3. Name, file number, and address of labor organization. Name <u>International Association of Bridge, Structural, Ornamental & Reinforcing Iron Workers Local No. 399</u> Labor Organization File Number <u>034-927</u> P.O. Box, Building and Room Number, if any _____ Street <u>409 Crown Point Road</u> City <u>Westville</u> State <u>New Jersey</u> ZIP Code + 4 <u>08093</u>
5. Position in labor organization. <u>Financial Secretary/ Treasurer/Business Agent</u>	

Enter appropriate data below if, during the past fiscal year, you or your spouse or minor child directly or indirectly had any of the following interests (except as specified in the exclusions set forth in the instructions):

A. Held an interest in, engaged in transactions (including loans) with, or derived income or other economic benefit of monetary value from an employer whose employees your organization represents or is actively seeking to represent. See attached list.	
3. Name and address of Employer (including trade name, if any). Name <u>See attached list</u> Trade Name, if any: _____ P.O. Box, Bldg., Room No., if any _____ Street _____ City _____ State _____ ZIP Code + 4 _____	7.a. Nature of Interest, Transaction, or Income. <u>Campaign Contributions</u> 7.b. Amount. <u>See attached</u>

Signature

15. Signature and verification. The undersigned declares, under penalty of Perjury and other applicable penalties of the law, that all of the information submitted in this report (including the information contained in any accompanying documents), has been examined by the signatory and is, to the best of the undersigned's knowledge and belief, true, correct, and complete. (See the section on penalties in the instructions.)		
Signed <u>[Signature]</u>	On <u>8/11/05</u> Date	<u>856-456-9323</u> Telephone Number

Name of Person Filing **Stephen M. Sweeney**

File Number U-

B. Held an interest in or derived income or economic benefit with monetary value **from a business** (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.

8. Name and address of Business (including trade name, if any).

Name _____

Trade Name, if any: _____

P.O. Box, Bldg., Room No., if any _____

Street _____

City _____

State _____ ZIP Code + 4 _____

9. Business deals with:

☐ a. Labor Organization

☐ b. Trust

☐ c. Employer

10. If 9.b. or 9.c. is checked give trust or employer's name.

Name _____

Trade Name, if any: _____

P.O. Box, Bldg., Room No., if any _____

Street _____

City _____

State _____ ZIP Code + 4 _____

11.a. Nature of such dealing.

11.b. Approximate dollar value of such dealing. _____

12.a. Nature of interest held or income received.

12.b. Amount

C. Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value.

13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any).

Name See attached statement

Trade Name, if any: _____

P.O. Box, Bldg., Room No., if any _____

Street _____

City _____

State _____ ZIP Code + 4 _____

14.a. Nature of payment.

Campaign Contributions

See above.

13.a. Is the Business an Employer ☐ or Consultant ☐

14.b. Amount of payment. See above.

A.3 Employers:

M&T Erection Enterprize, Inc. 110 Adams Avenue Mantua, NJ 08051 856-464-0557	\$1,500.00
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JL Erectors 835 Camden Avenue Blackwood, NJ 08012 856-232-9400	\$1,000.00
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WT Welding Co., Inc. 2034 Briggs Road Mt. Laurel, NJ 08054 856-235-3668	\$ 500.00
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C. 13a. Statement

Numerous employers have made campaign contributions. Accordingly, I incorporate by reference campaign contribution filings made with the Election Law Enforcement Committee (ELEC). These reports are on file with ELEC and are available to you electronically on the ELEC website (www.elec.state.nj.us). If you would like me to provide you with "hard copies" of these reports, I will provide them.